Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

7247,00002

												00
CLAIMS AS FILED - PART I (Column 1) (Column 2)						umn 2)		SMALL ENTITY TYPE			OTHER SMALL	
TC	OTAL CLAIMS		20					RATE	FEE	7	RATE	FEE
FOR				NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	20 - min	nus 20=	*4			X\$ 9=		OR	X\$18=	
	DEPENDENT CL		7 _ minus 3 = *45					X43=	17215	TOR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM PF	RESENT					+145=	1-16016-	OR	+290=	
* If	the difference	in column 1 is	less than ze	less than zero, enter "0" in column 2				TOTAL	557:0	OR	TOTAL	
	С	Caluma 1)	MENDED			(O-1 2)		SMALL	ENTITY	OR	OTHER SMALL E	
		(Column 1)	<del></del>	(Colum		(Column 3)	. ,	DIVINEL .	INTITI	Un ,	DIVIALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MI	Minus	PENDENT	- CLAIM	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF INC	JLTIPLE DEPENDENT		CLAIIVI		<sup> </sup> .	+145=		OR	+290=	
							L	TOTAL ADDIT. FEE		OB	TOTAL ADDIT. FEE	
		(Column 1)	•	(Colum	nn 2)	(Column 3)		\DU:				
		CLAIMS		HIGHE		T	1 r	· · · · · · · · · · · · · · · · · · ·				1221
IENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ <sup>-</sup> 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CL AIM	=		X43=		OR	X86=	
	- FIRST FREGE	NIAHON OF WIL	LIPLE DEI	ENDENT	CLATIVI	الليالي	<b>'</b> [	+145=		OR	+290 <u>=</u>	
						•	L	TOTAL DDIT. FEE		CP	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)	,,	.DDI1. 1 EE =		•	40011.1	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT			Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>	Minus	***		=		X43=		OR	X86=	
	FIRST PHESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								ľ		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20 center "20."										OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												